

MONTANA CHEMICAL DEPENDENCY CENTER POLICY AND PROCEDURE MANUAL

Policy Subject: Patient Abuse	
Policy Number: CTP 10	Standards/Statutes: ARM 37.27.130
Effective Date: 01/01/02	Page 1 of 3

PURPOSE: To ensure providing physical and emotional safety, courtesy, dignity, and respect protects that each patient's right.

POLICY: Any form of patient abuse, physical, verbal, sexual, emotional, exploitative or neglect is absolutely prohibited and will not be tolerated.

PROCEDURE:

- I. All employees are responsible for being observant and reporting all suspected or obvious incidents of patient abuse.
- II. When an incident of any form of patient abuse is suspected or observed, the following measures must be initiated:
 - a. Immediately verbally report the incident or suspicion to your immediate supervisor; supervisors are to proceed with reporting up the chain of command until the Director, or their designee, has been notified.
 - b. The Director will verbally notify a Personnel Specialist within the DPHHS Personnel Division, as soon as possible, or within 24 hours of the reported incident.
 - c. Within 24 hours, the individual initially reporting the suspected abuse incident must follow-up their verbal report with a typed report of the incident to their supervisor. This report must include: the date, day and time of the suspected incident; the name of the abused patient; the name(s) of staff involved; the circumstances surrounding the incident; any staff or other patients who witnessed the incident; any other pertinent information to the incident.
 - d. The immediate supervisor of the person(s) alleged to have committed an abusive act will be notified by that supervisor that these allegations have been made. This supervisor will also contact the alleged victim of the abuse and take written notes of

their description of the incident as well as encouraging them to provide a written response outlining the alleged abuse. The immediate supervisor will also contact any witnesses to the alleged incident and their verbal and written responses of their observations will be collected.

- e. The information gathered in Number 4 above, will be reviewed by the immediate supervisor and the facility Director and then shared and coordinated with the DPHHS Personnel Division. A determination will be made if enough evidence exists to proceed, if additional evidence needs to be gathered, or the case is dropped.
 - f. The person alleged to have committed the abusive act will then be notified in writing, by their immediate supervisor, within five (5) working days, of the results of Number 5 above and any pending actions or consequences and offered the opportunity to respond in writing to the allegations.
 - g. If further investigation is determined to be necessary, a fact-finding Committee or independent investigator from outside the facility may be called to thoroughly investigate the alleged incident in accordance with standard investigative procedures. The results of this investigation will then be put in typed format with a detailed report of the investigative findings and recommendations provided to the immediate supervisor and facility Director. The recommendations of the investigation may be implemented, in whole, or in part, and may be augmented with additional consequences, as may be warranted or appropriate. Copies of this report and any actions will be forwarded to and coordinated with the DPHHS Personnel Division.
 - h. In any incident involving physical abuse, the facility physician who will determine the type and extent of physical injury and determine the appropriate course of action will see the victim immediately. All physician interventions will be documented in detail in the patient record. As may be applicable, photographs of any observable physical injuries will be taken and recorded in the patient record.
- III. Any employee alleged to have committed a patient abusive act may have union representation present with them at any point throughout this process.
 - IV. Any employee being investigated for an abusive act against a patient may be suspended without pay pending the completion of the investigation
 - V. Violation of this policy constitutes grounds for termination of employment.
 - VI. Employees who witness or have knowledge of patient abuse and fail to report it are subject to disciplinary action up to and including termination of employment.
 - VII. All information related to an actual or alleged patient abuse incident shall be recorded in the Personnel File of the individual against whom the complaint has been made.

- VIII. Any employee suspended or terminated under the aforementioned circumstances has the right to appeal through established employee grievance procedures and the right to request an investigative hearing in accordance with established state policy.
- IX. Local law enforcement authorities will be notified in all cases of patient abuse when legal charges may be filed as a result of the incident. Internal investigations and subsequent actions/consequences will continue regardless of any legal investigation or actions in the incident. Lack of legal consequence does not eliminate any level of consequence by the facility.

Revisions: _____

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Name Title Date

Approved By: _____ 01/01/02
David J. Peshek, Administrator Date